PACER FUN TIMES – Participant Interest Form

Please complete the following information and return to PACER Center. If you have any questions please contact the FUN TIMES Coordinator at PACER Center.

1. **Participants’s name:** ____________________________________________
   
   School: ___________________________ Grade completed: ___________ Age: ___________
   
   Address: ___________________________ City: __________________ Zip: _______________
   
   Participants’s phone: _________________________ Email: ____________________________

2. **Parent 1:** ________________________________________________________
   
   Address : _______________________________ City: __________________ Zip: _______________
   
   (if different from above)
   
   Phone Day: _______________ Evening: _______________ Cell: ___________________________
   
   Email: __________________________________________________________________________

3. **Parent 2:** ________________________________________________________
   
   Address : _______________________________ City: __________________ Zip: _______________
   
   (if different from above)
   
   Phone Day: _______________ Evening: _______________ Cell: ___________________________
   
   Email: __________________________________________________________________________

Does the participant have a disability? ☐ Yes ☐ No

Does the participant need any accommodations to participate, or is there information you want PACER to know?
_____________________________________________________________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Why does the participant want to be involved in FUN TIMES? ______________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

Activities that the participant thinks would be fun and interesting? _____________________________________
_____________________________________________________________________________________
_____________________________________________________________________________________

PACER Center, Inc. | 8161 Normandale Boulevard | Minneapolis, MN 55437-1044
(952) 838-9000 Voice | (952) 838-0199 Fax | (800) 53-PACER Toll-free
Web site: www.PACER.org | E-mail: PACER@PACER.org
An information and training center for families of children and youth with disabilities